Rational Pharmaceutical Management Plus
Training in Drug Management – Follow Up on RPM Plus Activities
Côte D'Ivoire Trip Report – January 16 – January 19, 2006

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About RPM Plus

The Rational Pharmaceutical Management Plus (RPM Plus) Program, funded by the U.S. Agency for International Development (cooperative agreement HRN-A-00-00-00016-00), works in more than 20 developing countries to provide technical assistance to strengthen drug and health commodity management systems. The program offers technical guidance and assists in strategy development and program implementation both in improving the availability of health commodities—pharmaceuticals, vaccines, supplies, and basic medical equipment—of assured quality for maternal and child health, HIV/AIDS, infectious diseases, and family planning and in promoting the appropriate use of health commodities in the public and private sectors.

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Acronyms

APHL	association of public health laboratory
ART	anti-retroviral treatment
ARV	anti-retroviral
CDC	U.S. Center for Disease Control and Prevention
CI	Côte d'Ivoire
DFR	Training Unit of the Ministry of Health
DIPE	Information, Planning and Research Unit of the Ministry of Health
DMIS	drug management information system
EGPAF	Elizabeth Glaser Pediatric AIDS Foundation
HIV/AIDS	human immunodeficiency virus/acquired immune deficiency syndrome
IMAT	Inventory Management Assessment Tool
MOH	Ministry of Health
MOU	Memorandum of Understanding
MSH	Management Sciences for Health
PEPFAR	President's Emergency Plan For AIDS Relief
PGP	Assistant Pharmacist
PMTCT	prevention of mother to child transmission (HIV)
PNPEC	HIV/AIDS national program
PSP-CI	Public Health Pharmacy - Central Medical Store
RPM Plus	Rational Pharmaceutical Management Plus Program
SCMS	Supply Chain Management System
SIMPLE	Information system for managing drugs used in epidemics
SMS	Strategic Monitoring System
SOP	Standard Operating Procedure
USAID	United States Agency for International Development
TA	technical assistance
USG	US Government
VCT	Voluntary Counseling Testing

Background

The US Government (USG) launched the President Bush Initiative in 2002, aimed at assisting 15 countries in efforts to develop the Prevention of Mother to Child Transmission (PMTCT) of HIV/AIDS. Côte d'Ivoire was among the first countries to receive assistance from the President's initiative. The Bush Initiative was immediately followed by the President's Emergency Plan for AIDS Relief (PEPFAR) targeting the same 15 countries. Through the Center for Disease Control (CDC) and the US Agency for International Development (USAID), the US Government is currently providing funds and technical assistance to strengthen PMTC activities in more than 100 facilities, and antiretroviral treatment in 68 health facilities. At CDC request, MSH/RPM Plus assessed the capacity of the Central Medical Stores "Public Health Pharmacy" (PSP-CI) to support the PEPFAR implementation and expansion. PSP-CI plays a major role in the organization and delivery of health services in Côte d'Ivoire. PSP-CI is a governmental structure that has been assigned the mandate to procure and deliver health commodities to public health facilities. With the explosion of the HIV/AIDS epidemic, PSP-CI's role became critical in procuring antiretroviral drugs (ARV) and other commodities necessary for the treatment of people affected by the HIV/AIDS infection.

Following the assessment, RPM Plus received funds from the USG to provide technical assistance to PSP-CI for the reinforcement of its institutional capability and improvement of human resources needed to develop drug management activities in support to the PEPFAR. RPM Plus assisted PSP-CI in building a core of trainers in drug management and in the preparation of a curriculum in drug management to be used for training of staff at central and district levels as well as service providers from accredited ART health facilities. The curriculum tested in July 2005 was used during a formal training workshop for 20 pharmacists in October 2005. Another group of 20 was scheduled to be trained during the month of January 2006.

In addition to the ongoing activities, USAID requested that RPM Plus also concentrate some efforts on lab commodities necessary to the PEPFAR development. The RPM Plus lab specialist, Grace Kahenya, was contacted to join Michael Derosena for a reconnaissance visit focused on HIV/AIDS lab commodity and identification of interventions to improve management of lab products in addition to activities to be developed by the Association of Public Health Laboratory (APHL) in Côte d'Ivoire.

Purpose of Trip

The original length of stay for Michael Derosena and Grace Kahenya during this trip was for the period of January 16 to January 27, 2006 to assist the local advisor in the implementation of RPM Plus technical assistance activities. Michael Derosena planned to support the PSP-CI trainers in the third round of training in drug management and would take the opportunity during this visit to meet with partners from the MOH – PNPEC, DFR, DIPE – to discuss areas of priority for immediate coordination and technical assistance. The plan for Grace Kahenya was to investigate the situation of lab commodity management in light of the PEPFAR activity development.

The Scope of work for Michael Derosena was as follows:

- Meet with PSP-CI trainers and staff from the Training Unit of the MOH to review the drug management curriculum based on input/comments/suggestions from the last training workshop in October 2005;

- Assist the local team of trainers in conducting the training for 20 pharmacists from health districts and selected PMTCT/ART accredited centers;

- Meet with the PSP-CI Director to:

    - Clarify as needed the last version of the memorandum of understanding related to the implementation of ORION, clarify progress in the adaptation of the software to PSP-CI needs, and discuss tentative dates for the installation and training of named users;
    - Discuss progress in the execution of the RPM Plus advisor's scope of work and coordination with other staff from PSP-CI and the ARV management unit;
    - Discuss strategies and mechanisms for building the HIV/AIDS commodity information system in coordination with DIPE.

- Meet with the PNPEC Director to discuss:

    - RPM Plus support to PNPEC in the context of expansion of the HIV/AIDS program, including supervision and monitoring of HIV/AIDS activities;
    - RPM Plus technical assistance for the preparation and dissemination of the revised HIV/AIDS Standard Treatment Guidelines;
    - Key indicators for the HIV/AIDS drug management information system;
    - Status of the Axios donation program of Nevirapine for PMTCT activities.

- Meet with DIPE Director to discuss:

    - Basic tools for collecting information on HIV/AIDS commodity management at ART sites, district and central levels;
    - Mechanisms to facilitate the smooth flow of information from ART sites to the central level and vice versa;
    - Preparation of periodic reports to share with the USG team and partners.

- Meet with EGPAF to:

    - Review progress in collaboration activities including training for drug management, training in the use of SIMPLE-1, collection of data for ARV quantification, and strategies for reinforcing the ARV management information system;
    - Discuss the EGPAF procurement plan of HIV/AIDS commodities in support of targeted accredited VCT/PMTCT/ART centers;

- Meet with the SCPA Law Office Dogué Yao & Associates to clarify issues related to the registration of MSH in Côte d'Ivoire

- Brief upon arrival and/or debrief prior departure USAID officials, as requested.

The Scope of work for Grace Kahenya was as follows:

- Review plans and background documents related to MSH/RPM Plus work in Cote d'Ivoire, and previous laboratory report(s) developed by other partners.

- Conduct a situation analysis of the current challenges facing the laboratory sector in Cote d'Ivoire with emphasis on laboratory commodities vital to the national HIV/AIDS national program. The methodology will include:

    - Interviews with representatives of the Public Health Laboratory department of the MOH Cote d'Ivoire, the Association of Public Health Laboratories (APHL) and CDC, the RETRO-CI project, and the central medical stores of Cote D'Ivoire (PSP-CI);
    - Field visits to a selected number (3-4) of facilities where HIV/AIDS services are being delivered. The selection of facilities will reflect a mix of different health system levels i.e. hospital, health center, etc. and will capture the breadth of HIV/AIDS services i.e. ART, PMTCT and VCT.

- Develop clear recommendations (with potential options) for addressing the key challenges of laboratory commodities as identified in the situation analysis.

- Propose a plan of action for the implementation of identified key priorities. These priorities will be agreed upon with USAID and key PEPFAR partners during the consultancy.

- Brief upon arrival/or debrief prior departure USAID officials, as needed.

Activities

This visit was completely impeded by the deterioration of the political situation in Côte d'Ivoire. Michael Derosena arrived on the 16th of January and Grace Kahenya on the 17th. The capital Abidjan was totally paralyzed by roadblocks, riots and other annoyances that forced us to stay in our hotel, following instructions of the American Embassy. Grace was stuck in a transit place inside the airport while upon arrival Michael Derosena was transported to the IBIS hotel in a safe location in Abidjan. From my place however, I was able to conduct meetings with the PSP-CI Director Dr. Souaré, as well as with the MSH/RPM Plus local consultant, Dr. Moise Touhon, and one of the trainers in drug management, Dr. TIA Raphael, both responsible for the roll out of the ARV dispensing tool "SIMPLE-1".

Key points discussed with Dr. Souaré were the following:

- Preparation of a workshop for developing Standard Operating Procedures (SOP) for drug management operations: PSP-CI has initiated the reinforcement of quality assurance activities in recruiting two consultants (Mr. ODI and Mr. KABLAN) to work with PSP-CI staff on the terms of reference for the different services and job descriptions for each position. Due to the fact that these two consultants only have administrative backgrounds, as a first step, PSP-CI staff will describe the current procedures in drug management followed on a daily basis versus procedures recommended in documents available at PSP-CI. MSH/RPM Plus requested that Dr. Touhon be introduced to the consultants for coordination of the SOP preparation and development. It was suggested by MSH that the methodology documents and workplan be shared with RPM Plus which will assist PSP-CI on the technical aspects of drug management procedures. It was agreed that Dr. Touhon will be the link between the consultants and the MSH office in Washington. A document drafted by RPM Plus in Washington was transmitted to Dr. Souaré to explain the key elements of the methodology. During that meeting with Dr. Souaré, it appeared that there were no differences between the RPM Plus proposed methodology and the one currently in application at PSP-CI. All documents currently available will be collected to be sent to the RPM Plus office in Washington.

- Training plan in drug management: This plan will be based on the previous one, and will be prepared by Dr. Attia and Dr. Touhon for submission to the PSP-CI Director by mid February. Dr. Souaré requested to be informed in time on all planned activities. Apparently, she did not receive enough information allowing her to have a broader view of training activities conducted and/or planned. This problem might be the result of the operation of the communication unit at PSP-CI since all training activities are followed by the preparation and submission of a report. It was proposed to establish a better mechanism for the transmission of information. The training plan will take into account lessons learned from the previous training experiences and needs identified according to the different categories of personnel operating at VCT/PMTCT/HIV/AIDS centers.

  A training workshop in drug management was scheduled for the week of January 23rd. It was postponed as a result of the insecurity in Côte d'Ivoire. Dr. Souaré has been told that RPM

Plus will put a break on training activities to focus more on follow up and needs assessments of the trainees on the field. However, given numerous drug management problems encountered at PSP-CI itself, there will be a training round specifically targeting the PGPs at PSP-CI. The execution of this training will be discussed with Dr. Attia who has been coordinating training activities jointly with Dr. Moise Touhon. Moreover, it was recommended that Mr. Adou be integrated in the team for a better coordination of training and refresher courses activities under his responsibility. The drug management curriculum used for pharmacists and PGPs already integrates the same management tools used for refresher courses. In fact, Mr. Adou was expected in this training workshop to take place in Aboisso and now postponed for security reasons.

- Post training strategy: This was a key point discussed in-depth with Dr. Souaré. It is critical to reinforce knowledge in drug management and promote good practices in pharmaceutical management through training activities. It is more critical to develop follow up training activities to ensure that the trainees are applying lessons and principles taught during training and they are making enough efforts for behavior changes. Dr. Souaré agreed to put a monitoring and supervision unit in place to ensure post-training follow up activities including the application of the indicator-based tool IMAT to evaluate inventory management practices in general at service delivery points. This unit will assess/update training needs as well as refresher courses for specific targets at all levels of the health system. This supervision unit will include health district pharmacists who will be the link between the PSP-CI central level and health facilities delivering ART services.

- Roll out of SIMPLE-1 and SIMPLE-2: Dr. Touhon, jointly with the PSP-CI consultants Sidibé and Fofana, will continue to be the key resources for the development and expansion of the tracking tool. They will be assisted by Dr. Tia Raphael according to needs. Dr. Touhon will continue to focus on support to be provided to the field while collecting data generated by SIMPLE-1 to be filled into SIMPLE-2 in efforts to build the ARV management information system. It is still critical that the Planning, Information, Evaluation and Research Unit (DIPE) of the Ministry of Health be actively involved in that activity. Unfortunately, it was not possible to conduct the meeting with DIPE as planned in the scope of work. However, Dr. Touhon will continue to cover the field (ART centers) and circulate information collected among other staff of the ARV management unit at PSP-CI. In the meantime, Dr. Souaré will try to set up a formal meeting at PSP-CI with the DIPE Director and the national program "PNPEC" Director to launch the rehabilitation of the ARV management information system.

- ORION activities: A final version of the memorandum of understanding (MOU) and the ORION license was submitted to Dr. Souaré. This version includes recommendations and suggestions made by the lawyers following their review of the first draft submitted to PSP-CI. According to Dr. Souaré, these documents need to be transmitted directly to the new Minister and his Cabinet for a new analysis. Moreover, Dr. Souaré no longer has the authority of signature, given the recent changes at the MOH. In the meantime, the preparation process for installation at PSP-CI will continue. RPM Plus again requested the tracking sheet be submitted for assessing progress on reinforcement of computer capacity at PSP-CI and staff be targeted for training with ORION from Dr. Souaré. A conference call took place between RPM Plus/Washington and PSP-CI a few days before this trip to Côte d'Ivoire for an update

on customization of ORION, as requested by Mrs. De Bato at PSP-CI, related to the possibility of tracking products on the pipeline. Dr. Souaré was informed on the progress and was asked to complete the process of recruiting the IT specialist at PSP-CI.

- Recruitment of the IT specialist at PSP-CI: This activity is a pre-requisite for the installation of ORION. It was supposed to be completed months ago. We were told by Dr. Souaré that, unfortunately, the candidate did not pass the test required by the Public Administration Office, which explains the delay to fill this position. Dr. Souaré proposed to advertise this position again and eventually contact other ministries/services where computer specialists might be interested in switching to PSP-CI. RPM Plus insisted that this is a requirement not only for the ORION installation, but for PSP-CI operations in general, with or without ORION.

- SCMS visit to Côte d'Ivoire: Dr. Souaré was informed about the selection of Côte d'Ivoire as one the priority countries and the visit of the USG team related to the implementation of the SCMS program. She was excited about this additional resource to be provided to Côte d'Ivoire and the possibility of complementarities between RPM Plus and SCMS activities. She is specifically interested in coordination of procurement activities involving EGPAF, the reinforcement of the HIV/AIDS commodity distribution network, support to be provided to the health district pharmacists, and the reinforcement of the drug management information system for quantification and procurement.

Key points discussed with Dr. Moise Touhon were the following:

- Training plan as requested by Dr. Souaré. The existing document will be sent to him for an update with Dr. Attia's input and submission to Dr. Souaré as soon as possible;

- Need to postpone the training workshop planned in Aboisso. The review of session 11 of the current curriculum will include an Excel version of the ARV quantification tool instead of using the manual sheet;

- Meeting with DFR for the final step of validation of the curriculum in drug management. Although the DFR has given its ok to the curriculum, PSP-CI still needs to submit a list of names to be included in a *"Committee of Validation"*. Then this committee will take two or three days to make the validation process more formal. DFR is only a coordination structure. Technical competencies are only from PSP-CI and staff from the Faculty of Pharmacy to be contacted for the validation process. This activity should be completed very soon;

- Monitoring plan to cover all centers where pharmacists and PGP have already received training in drug management, based on priority. Plan to be discussed with other ARV management unit staff before submission to Dr. Souaré;

- Follow up with the lawyer's office in charge of the registration of MSH in Côte d'Ivoire. All documents requested were collected, notarized and submitted to Mr. Seydou Zerbo, key contact at the SPCA Cabinet at Law in charge of this activity. The translation in French of all documents is ongoing in case a French version is requested by the Ivorian authorities;

- Roll out of SIMPLE-1 and SIMPLE-2. The information on ART sites from the EGPAF network where operator pharmacists were trained needs to be updated. Also, at the request of the National Tuberculosis Program, discuss the possibility of adapting SIMPLE-1 for tracking TB drugs. Consequently, the tool might be configured and a test will be conducted in one facility;

- Data and information needed for the RPM Plus Strategic Monitoring System (SMS) and the quarterly report to be submitted to USAID;

- MSH policy for use of the rented vehicle for RPM Plus activities.

Key points discussed with Moise Touhon and TIA Raphael were the following:

- Follow up of the training on the use of SIMPLE-1 at EGPAF sites in coordination with Dr. Yapi Faustin, EGPAF pharmacist;

- Adaptation to the Côte d'Ivoire context and application of the Excel version of the quantification tool at PPH Cocody where Dr. TIA Raphael operates;

- Preparation of the next round of training in drug management for pharmacists for the remaining ART centers (delayed) as well as PGPs from PSP-CI;

- Methodology and mechanisms for the implementation and use of SIMPLE-2 at intermediate levels (health districts) and the central level (PSP-CI and DIPE).

Because of security problems, Grace Kahenya was not able to leave the airport after her arrival in Côte d'Ivoire. She was forced to return home on the first flight available. However, she had a chance to briefly meet with USAID and CDC at the RETRO-CI project. Her report will be submitted separately. The plan is to schedule another trip when the political situation becomes more stable.

Next Steps

- Preparation of the SCMS visit to Côte d'Ivoire tentatively scheduled for mid-February;

- Re-schedule another trip for Grace Kahenya to investigate management of lab commodities for HIV/AIDS services. In the meantime, analysis of documentation related to lab activities is provided by Chantal Maurice;

- Re-schedule the training workshop in drug management in Aboisso and plan a training session for PGP from PSP-CI;

- PSP-CI Director will send draft of SOP documents to RPM Plus for review. An updated plan of development will be prepared in coordination with RPM Plus;

- Meet with DIPE for the harmonization of drug management tools to be used at accredited centers for collecting data on HIV/AIDS patients and ARV management;

- Prepare a follow up plan jointly with EGPAF and consultants from the ARV management unit to assist the newly trained field staff to use SIMPLE-1;

- PSP-CI Director will meet with DIPE and PNPEC to review strategies for building the ARV management information system;

- PSP-CI Director will submit the ORION documents to MOH for approval and signatures. In the meantime PSP-CI inventory data will be collected and sent to MSH/RPM Plus to be included in the ORION database.

Conclusions

This trip was trounced by unpredictable political events. However, the excellent collaboration between PSP-CI and RPM Plus prevailed and some key elements of RPM Plus technical assistance to PSP-CI were reviewed with Dr. Souaré. The uncertainty is still present because of the recent political changes in the CI Government. However, Dr. Souaré continues to show an extreme confidence in MSH and RPM Plus' work in Côte d'Ivoire. A total of 56 staff (all categories) have received training in drug management; 35 have received training to use SIMPLE-1. With TA provided, PSP-CI is now able to show some credible data on patient regimens and ARV management. However, challenges are still enormous, especially to ensure follow up on training and facilitate behavior changes of pharmacists in the field. Also, the ARV management information system needs to be coordinated and standardized with functional mechanisms in order to operate smoothly. These are among the main challenges to address immediately. RPM Plus is confident that with the continuous support received from the USG team and the excellent relations developed with DFR, DIPE, PNPEC, there will be significant progress towards achievement of the PEPFAR objectives.